

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 9/747 700	FILING DATE				
						APPLICANT(S)					
12/10/84 CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	1		1		1						
TOTAL DEP.	14		4		8						
TOTAL CLAIMS	15		10		9						
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TOTAL IND.											
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TOTAL CLAIMS											

PTO-1340 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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